## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number 99 RE USA ALBR P13 3USA

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN	
TOTAL CLAIMS			41			•		RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUME	MBER EXTRA		BASIC FEI	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			41 minus 20=		• 21			XS 9=		OR	X\$18=	378
INDEPENDENT CLAIMS			7 minus 3 =		4			X43=		OR	X86=	344
MULTIPLE DEPENDENT CLAIM PRESENT							]	+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2						ı	TOTAL		OR	TOTAL	1492	
]. <del> </del>	FANGT CLAIMS AS AMENDED - PART II 3-29-05 (Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	OTHER SMALL	THAN
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 35	Minus	4	/	= O	]	X\$ 9#	X	OR	X\$18=	
AME	Independent	· 7	Minus	7	C: 4/94	] = '( <i>(</i>  )	4 [	X43=		98	X86=	X
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=	
							L	TOTAL ODIT, FEE		OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	]	X43=		OR	X86=	
Q.	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		<sup>]</sup>	+145=		OR	+290=	
										OR	TOTAL	
ADDIT, FEE ADDIT, FEE ADDIT, FEE (Column 1) (Column 2) (Column 3)												
AMENDMENT C	`	CLAIMS REMAINING AFTER AMENDMENT	-	HIGHE NUMBI PREVIOL PAID FI	ST ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	lΓ	X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **ADDIT. FEE**  **OR												
		nber Previously Paid ber Previously Paid					r foun	d in the app	ropriate box	in colu	mn 1.	